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A. RAMSEY 0CT 29 2024

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LUXURY LIMOUSINE OF PACM BEACH IN
DOCUMENT NUMBER: 9 9 0000 98 139
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
PAUL ANTONE LCI Name of Contact Person
PAUL ANTONELLI Name of Contact Person LUXUPY LIMUUSINE OF PACM BEACH INC Firm/ Company
<u>4061</u> 70 + ω <u>CT.</u> ω Address
WEST PALM BEACH FC 33404 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PAUL ANTONE LLI at (561) 601 3897 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\begin{array}{ c c c c c c c c c c c c c c c c c c c
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2024 OCT 15 PM 12 36

LUXVRY LIMOUSIN	Oocument Nun	PALM	Ith the Florida D		• •
(I Fursuant to the provisions of section 607.1006, F	Document Nun	PALM ober of Curpora	BEACH	1016	000
ursuant to the provisions of section 607.1006, F		iber of Corpora		1770	793000092
	Florida Statutes		tion (11 known)		
		, this <i>Florida I</i>	Profit Corporation	adopts the follo	owing amendment(s) to
If amending name, enter the new name of	the corporation	on:			
					The new
ime must be distinguishable and contain the wo Inc.," or Co.," or the designation "Corp," chartered," "professional association," or the	"Inc," or "Co	o". A profess			
. Enter new principal office address, if apple Principal office address MUST BE A STREET					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>(E BOX</u>)	-			
. If amending the registered agent and/or re new registered agent and/or the new registered			lorida, enter the I	name of the	
					
Name of New Registered Agent					
	(Flor	ida street addre.	55)		
New Registered Office Address:				, Florida	
		(City)	•		Zip Code)

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change	T	ROBIN	ANTONE	۷۲/
Add				5070 SEINKWOOP WI
Remove				HOBE SOUND FL 3345
2) Change				
Add				
Remove 3)Remove				
Add		٠		
Remove				
4) Change				
Add				
Remove				
5) Change				
Add			•	
Remove				
6) Change	•	_		
Add				
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The date of each amendment(s) adoption:	10/7/24	, if other than the
date this document was signed.	• •	
Effective date if applicable: (no more	ו אל און 10 אל אל 10 rc than 90 days after dmendment file date,)
fue mes	, , , , <u></u> , ,	
Note: If the date inserted in this block does not meet t document's effective date on the Department of State's r		ts, this date will not be listed as the
Adoption of Amendment(s) (CHECK O	<u>NE</u>)	
The amendment(s) was/were adopted by the incorpora	ators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approval.		iendment(s)
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group en		
"The number of votes cast for the amendment(s	i) was/were sufficient for approval	
by	"	
by(voting group	p)	
Dated		
Signature Par Au	Toul	
(By a director, president or o	other officer - if directors or officers have	
selected, by an incorporator appointed fiduciary by that	- if in the hands of a receiver, trustee, or fiduciary)	other court
	UL ANTONE LC or printed name of person signing)	./
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	PRZS person signing)	·
(Title of	person signing)	